PATENT APPLICATION FEE DETERMINATION RECORD Effective December 3, 2004

CLAIMS AS FILED - PART						SI			SMALL ENTITY		OTHER THA		
<u></u>	TAL CLAIMO	(Columr	(Column 1)		(Column 2)		TYPE		OR		ENTITY		
TOTAL CLAIMS						·		RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	39	OR	BASIC FEE	790.00	
TOTAL CHARGEABLE CLAIMS			9 minus 20=		* O.			x\$∂5	1	OR	x:50	1	
INDEPENDENT CLAIMS			2 minus 3 =		* 0			×100		OR	× 200	/	
MULTIPLE DEPENDENT CLAIM PRESENT					,				 /	1	a	-/-	
* If the difference in column 1 is less than zero, enter					"0" in c	column 2		190.00 TOTAL		OR	000		
CLAIMS AS AMENDED - PART								IOIAL		JOR	TOTAL OTHER	THAN	
	; .	(Column 1)		(Colur	nn 2)	(Column 3)		SMALL	ENTITY	OR	SMALL		
AMENDMENT A	·	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	* 9	Minus	** 0	20	= 0		X\$ 25	/	OR	X\$ 55	/	
	Independent	* マ	Minus	***	<u> </u>	= 0		x.100		ÖR	× 200	/ .	
L	FIRST PRESE	NTATION OF M	JLTIPLE DEI	PENDENT	CLAIM							/	
•		.:	,				. !	TOTAL	/ _	OR OR	+ 360 TOTAL		
		(Column 1)	•	(Colun	nn 2\	(Column 3)	/	ADDIT. FEE	<u>.</u> .		ADDIT. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVICE PAID I	EST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	##		= .	. [X\$25		OR	X\$ 50		
	Independent	*	Minus	***		2		×/00		OR	× 200		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT O							· ·		! I			
٠		,					Ĺ	+ /80 TOTAL		OR	360 TOTAL		
٠.		•		•		•	A	ODIT FEE		OR ,	DDIŢ. FEE		
		(Column 1) CLAIMS		(Colum		(Column 3)	-	· ·					
AMENDMENT C		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		<u>.</u>		X\$25		OR	X\$ 50		
	Independent	*-	Minus	***		= '	×	×/00		OR	×200		
	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	ENDENT	CLAIM		ŀ	+/80		l		÷	
. ★ }	* If the entry in column 1 is less than the entry in column 2, write *0" in column 3.									OR	+360		
***	f the "Highest Nu If the "Highest Nu	mber Previously Pa mber Previously Pa ber Previously Paid	id For" IN THIS ld For" IN THIS	S SPACE is S SPACE is	less than less than	1 20, enter "20." 1 3, enter "3."		TOTAL DDIT. FEE	ropriate box		TOTAL DDIT: FEE mn 1.		